

DISTRIBUTION
 SANTA FE
 FILE
 U.S.G.S.
 LAND OFFICE
 TRANSPORTER
 OIL
 GAS
 OPERATION
 PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
 Supersedes Old C-104 and C-105
 Effective 1-1-65

Operator
 Petro-Lewis Corporation
 Address
 607 Austin Levelland, Texas 79336
 Reason(s) for filing (if check proper box)
 New Well ☐ Change in Transporter of:
 Recompletion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
 Other (Please explain)

If change of ownership give name and address of previous owner
 Imperial American Management Co.

DESCRIPTION OF WELL AND LEASE

Lease Name
 Royalty Holding
 Well No.
 3
 Pool Name, including Formation
 Wantz Abo
 Kind of Lease
 State, Federal or Fee
 Fee
 Lease No.
 Location
 Unit Letter
 H
 1980 Feet From The
 North Line and
 660 Feet From The
 East
 Line of Section
 25
 Township
 21-S
 Range
 37-E
 NMPM
 Lea
 County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐
 Permian Corporation
 Address (Give address to which approved copy of this form is to be sent)
 Box 3119 Midland, Texas 79701
 Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
 Gulf Oil Co.
 Address (Give address to which approved copy of this form is to be sent)
 Box 1650, Tulsa Ok. 74102
 If well produces oil or liquids, give location of tanks.
 Unit
 B/67
 Sec.
 25
 Twp.
 21
 Rge.
 37
 Is gas actually connected?
 Yes
 When

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)
 Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐
 Date Spudded
 Date Compl. Ready to Prod.
 Total Depth
 P.B.T.D.
 Elevations (DF, RKB, RT, GR, etc.)
 Name of Producing Formation
 Top Oil/Gas Pay
 Tubing Depth
 Perforations
 Depth Casing Shoe
 TUBING, CASING, AND CEMENTING RECORD
 HOLE SIZE
 1274
 8 3/4
 CASING & TUBING SIZE
 9 5/8 "
 7"
 DEPTH SET
 863
 7480
 SACKS CEMENT
 500
 650

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks
 8/5/76
 Date of Test
 8/5/76
 Producing Method (Flow, pump, gas lift, etc.)
 Swab Test
 Length of Test
 10
 Tubing Pressure
 Casing Pressure
 Choke Size
 Actual Prod. During Test
 84.0
 Oil-Bbls.
 4.0
 Water-Bbls.
 80
 Gas-MCF
 TSTM

GAS WELL

Actual Prod. Test-MCF/D
 Length of Test
 Bbls. Condensate/MMCF
 Gravity of Condensate
 Testing Method (pilot, back pr.)
 Tubing Pressure (shut-in)
 Casing Pressure (shut-in)
 Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Harry R. Penon
 (Signature)
 Mgr. Oil & Gas Accounting
 (Title)
 July 17, 1978
 (Date)

OIL CONSERVATION COMMISSION
 APPROVED JUL 24 1978
 BY
 TITLE SUPERVISOR DISTRICT I
 This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.
 Separate Forms C-104 must be filed for each pool in multiply completed wells.